

What is a cervical polyp?

A polyp is a growth of tissue from either the outside of the cervix (neck of the womb) or inside the cervical canal (the passageway between the vagina and the womb).

Polyps are usually benign (not cancerous) and can be removed quite easily.

There are often no symptoms and the polyp will only be noticed when you attend for a HPV screening test (smear).

However, some polyps can cause bleeding after sexual intercourse, bleeding between periods, bleeding after the menopause, or discharge.

We may suggest an ultrasound scan to check that there are no other polyps within the womb or to assess where the base of the polyp starts.

What are the benefits - why should I have the polyp removed?

- A small percentage of polyps (between 2 and 15 in every 1,000) are abnormal and may develop into cancer if left.
- Removing the polyp should make symptoms such as bleeding after sexual intercourse or in between periods return to normal.
- A polyp sometimes makes it difficult to take an adequate HPV screening test, which means you could be asked to have more frequent screening.
- If left, a polyp may continue to grow.

What are the risks of having the polyp removed?

- Bleeding sometimes occurs after the polyp has been removed. A chemical substance called silver nitrate can be applied to stop any bleeding.
- Some polyps are too large to be removed in the outpatient department



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and may need to be removed in theatre. If this is the case a further appointment will be arranged.

• There is a very small risk of infection following removal of a cervical polyp. An offensive (bad) smelling discharge is a sign that an infection has occurred. If you suspect that you have an infection you should either contact the clinic or see your GP.

What happens during the procedure to remove the polyp?

Cervical polyps are removed with an instrument called polyp forceps. They are used to grasp the base of the polyp and the polyp is removed with a gentle twisting motion.

Occasionally, if the doctor or nurse cannot see the base of the polyp, a procedure called hysteroscopy is performed.

This involves passing a small camera through the neck of the womb to see if the polyp starts in the cervix or in the womb .

If bleeding occurs, a caustic substance called silver nitrate is applied to the area to stop the bleeding.

The polyp is then sent to the laboratory for examination to make sure that the tissue is normal.

Will I feel any pain?

Having a cervical polyp removed is not painful, however, you may feel mild discomfort similar to period pain afterwards.

If you are uncomfortable, a mild painkiller will be offered to you.

What happens after the procedure?

We will give you a sanitary towel to wear, as you will have some discharge which can continue for 7–14 days.

If silver nitrate was used, the discharge may be dark brown in colour for the first few days.

What do I need to do after I go home?

While you are bleeding or passing discharge, avoid tampons, sexual intercourse, swimming, long baths and strenuous exercise.

If you feel any discomfort you should take a painkiller such as paracetamol.

Will I have a follow-up appointment?

In approximately 4-6 weeks. We will write to you and your G.P. with your results.

This letter will also inform you if you need a follow up appointment.

If you have a problem or concerns or require further advice, please contact us on:

Doncaster Royal Infirmary:

Gynaecology Outpatient Clinic: 01302 642808 Ward G5: 01302 642650.

Bassetlaw Hospital:

Gynaecology Outpatient Clinic: 01909 572214 Ward B6: 01909 572254

Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

Telephone: 01302 642764 or 0800 028 8059.

Email: dbth.pals.dbh@nhs.net

Gynaecology